FILING DATE **CLAIMS ONLY** CLAIMS AFTER Dief ANDERDMEENT OND. DEP. AFTER 1st AMEDIDMENT AS FILED DED. DEP. , DEP. 060. 069. 96D. DEP. - 14 . 3.--7. 59 _6 13 . 14. : 18 :-68 `: : 18, TERRORE POST 19* 20 . · 70 · 71 22` TOTAL 5
TOTAL 60E. /6
TOTAL 16
TOTAL 16
CLADISS 4 TOTAL RED. _i _1 J TOTAL DER TOYAL CLAIMS * MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS FORM PTO-2022 (1-98)